| Fill in this information to identify your case: | | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of _ILLINOIS(State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|---------------------------------------|--|----------------------------|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your f | ull name | | |
| | Write th | ne name that is on your | Christina | |
| | govern | ment-issued picture | First name | First name |
| | | cation (for example, iver's license or | | |
| | passpo | | Middle name | Middle name |
| | Bring v | our picture | Byrd | |
| | identific | cation to your meeting e trustee. | Last name | Last name |
| | | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All oth | ner names you | | |
| | | sed in the last 8 | First name | First name |
| | years | | | |
| | Include your married or maiden names. | | Middle name | Middle name |
| | | | Last name | Last name |
| | | | | |
| | | | First name | First name |
| | | | Middle name | Middle name |
| | | | middle name | Middle flame |
| | | | Last name | Last name |
| | Omb. 4 | ha laat 4 dinita af | | |
| 3. | your S | he last 4 digits of Social Security | xxx - xx - <u>3567</u> | xxx - xx |
| | Individ | r or federal ual Taxpayer | OR | OR |
| | Identifi | cation number | 9xx - xx | 9 xx - xx |
| | | | | |

Document Byrd

Page 2 of 65 Case Number (if known)

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names I have not used any business names or EINs. and Employer I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in Business name Business name the last 8 years Include trade names and Business name Business name doing business as names EIN EIN Where you live If Debtor 2 lives at a different address: 3815 Canterbury Ct Number Street Number Street Unit GA Richton Park IL 60471 City State ZIP Code City ZIP Code COOK County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send the one above, fill it in here. Note that the court any notices to you at this mailing address. will send any notices this mailing address. Number Number Street Street P.O. Box P.O. Box ZIP Code City State City State ZIP Code Check one: Check one: Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy. I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. have another reason. Explain. I have another reason. Explain. See 28 U.S.C. § 1408 (See 28 U.S.C. § 1408

Christina

Debtor 1

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Desc Main

Document Byrd Christina Debtor 1 Case Number (if known) Last Name

| Pa | Tell the Court About You | r Bankruptcy | Case | | | | |
|-----|---|---------------------------------------|--|---------------------------|---|--|--|
| 7. | The chapter of the Bankruptcy Code you | | | | equired by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box. | | |
| | are choosing to file under | ☐ Chap | ter 7 | | | | |
| | under | ☐ Chap | ter 11 | | | | |
| | | ☐ Chap | ter 12 | | | | |
| | | Chap | ter 13 | | | | |
| 8. | How you will pay the fee | local yours subm with a less to pay t | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No | District None | When | Case Number | | |
| | | | District None | When _ | Case Number | | |
| | | | District | When _ | Case Number MM / DD / YYYY | | |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No | Debtor | | Relationship to you Case Number, if known MM / DD / YYYY | | |
| | | | | | Relationship to you Case Number, if known MM / DD / YYYY | | |
| 11. | Do you rent your residence? | □ No. ■ Yes. | Go to line 12 Has your landlord ob | tained an eviction judgm | ent against you? | | |
| | | | ■ No. Go to line ? □ Yes. Fill out <i>Ini</i> this bankruptcy | tial Statement About an I | Eviction Judgment Against You (Form 101A) and file it with | | |

Debtor 1 Christina Document Byrd Page 4 of 65

Case Number (if known)

| | | Last Name | | | | | |
|--|------------------------------------|---|--|--|-------------------------------|------------------------------|--|
| Report About Any Busin | esses You Ow | n as a Sole Proprietor | | | | | |
| Are you a sole proprietor of any full- or part-time business? | ■ No. □ Yes. | Go to Part 4. Name and location of b | ousiness | | | | |
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | | | |
| a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. | | Number Street | | | | | |
| | | City | | | | State | Zip Code |
| | | Check the appropriate | box to describe | your business: | | | |
| | | ☐ Health Care Busi | iness (as define | d in 11 U.S.C. § 1 | 101(27A)) | | |
| | | ☐ Single Asset Rea | ıl Estate (as def | ined in 11 U.S.C. | § 101(51B)) | | |
| | | ☐ Stockbroker (as o | defined in 11 U. | S.C. § 101(53A)) | | | |
| | | ☐ Commodity Broke | • | n 11 U.S.C. § 101 | (6)) | | |
| | | ☐ None of the abov | | | | | |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | appropria balance s document No. I | filing under Chapter 11, te deadlines. If you indicate, statement of operates do not exist, follow the am not filing under Chapter the Bankruptcy Code. | eate that you are ations, cash-flow procedure in 1 pter 11. | a small business statement, and f 1 U.S.C. § 1116(1 DT a small busine | debtor, you miederal income (| ust attach y tax return o | our most recent or if any of these e definition in |
| art 4: Report if You Own or Ha | ave Any Hazard | ous Property or Any Prop | erty That Need: | s Immediate Atten | tion | | |
| Do you own or have any | No. | | | | | | |
| property that poses or is alleged to pose a threat | _ | What is the hazard? | | | | | |
| of imminent and indentifiable hazard to | | | | | | | |
| | | | | | | | |
| public health or safety? Or do you own any | | | | | | | |
| Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock | | If immediate attention is | needed, why is | it needed? | | | |
| Or do you own any property that needs immediate attention? For example, do you own | | If immediate attention is | needed, why is | it needed? | | | |
| Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | | If immediate attention is where is the property? | | it needed? | | | |
| Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | | | | | | | |

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Part 5:

Debtor 1

Explain Your Efforts to R

15. Tell the court whether you have received a briefing about credit counseling.

Christina

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|---|
| You must check one: | You must check one: |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of: | ☐I am not required to receive a briefing about credit counseling because of: |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| Active duty. I am currently on active military duty in a military combat zone. | Active duty. I am currently on active military duty in a military combat zone. |
| If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. |

Case 18-05073 Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Document Page 6 of 65 Christina Debtor 1 Case Number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is No. excluded and administrative expenses Yes. are paid that funds will be available for distribution to unsecured creditors?

1-49 1,000-5,000 **2**5,001-50,000 How many creditors do **50-99** you estimate that you 5,001-10,000 **5**0,001-100,000 owe? ☐ More than 100,000 **100-199** 10,001-25,000 200-999 \$0-\$50,000 **□** \$1,000,001-\$10 million □\$500,000,001-\$1 billion How much do you estimate your assets to \$50,001-\$100,000 □ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion be worth? **\$100,001-\$500,000** □ \$50,000,001-\$100 million **□**\$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐More than \$50 billion

\$0-\$50,000 □ \$1,000,001-\$10 million □\$500,000,001-\$1 billion How much do you estimate your liabilities \$50,001-\$100,000 □ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion to be? **\$100,001-\$500,000** □ \$50,000,001-\$100 million □\$10,000,000,001-\$50 billion □ \$500,001-\$1 million □ \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below

I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct

> If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

> If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| /s/ Christina Byrd | * |
|-----------------------|-----------------------|
| Signature of Debtor 1 | Signature of Debtor 2 |

Executed on MM / DD / YYYY

02/02/2018

Executed on MM / DD / YYYY

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Document Christina Debtor 1 Case Number (if known) Middle Name Last Name

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Mariusz Krzysztof Zatorski | Date | Date: 02/02/2018 MM / DD / YYYY | | |
|----------------------------------|------------|------------------------------------|-----------|--|
| Signature of Attorney for Debtor | Bate | | | |
| Mariusz Krzysztof Zatorski | | | | |
| Printed name | | | - | |
| Geraci Law L.L.C. | | | | |
| Firm name | | | | |
| 55 E. Monroe St., #3400 | | | | |
| Number Street | | | | |
| | | | - | |
| Chicago | IL | 60603 | | |
| City | State | ZIP Code | | |
| Contact Phone312-332-1800 | _ Email ad | _{ldress} ndil@gera | cilaw.com | |
| 6307386 | IL | | | |
| Bar number | State | | | |

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| | | | 30001110111 | 1 446 6 6 |
|---------------------|----------------------|-------------------------------------|-------------|-----------|
| Fill in this in | formation to identi | fy your case: | | |
| | | | | |
| | | | | |
| Debtor 1 | Christina | | Byrd | |
| Debioi i | | | | |
| | First Name | Middle Name | Last Name | |
| | | | | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States | Bankruntey Court for | the: NORTHERN District of | ILLINOIS | |
| Office Otatoo | Burnaptoy Court for | and : <u>NOTATHERIA</u> District of | (State) | |
| O N | | | (State) | |
| Case Number | 「 <u></u> | | | |
| (If known) | | | | |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: | Summarize Your Assets | |
|---------|--|---|
| | | Your assets Value of what you own |
| | ole A/B: Property (Official Form 106A/B) by line 55, Total real estate, from Schedule A/B | <u> </u> |
| 1ь. Сор | by line 62, Total personal property, from Schedule A/B | \$ 20,625 |
| 1c. Cop | by line 63, Total of all property on Schedule A/B | \$ 20,625 |
| Part 2: | Summarize Your Liabilities | |
| rait 2 | | Your liabilities Amount you owe |
| | le D: Creditors Who Have Claims Secured by Property (Official Form 106D) y the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$20,217 |
| | le E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) y the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0 \$78,507 |
| 3b. Cop | y the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | <u>Ψ/0,50/</u> |
| | | |
| Part 3: | Summarize Your Liabilities | |
| | le I: Your Income (Official Form 106I) rour combined monthly income from line 12 of Schedule I | \$3,532.07 |
| | le J: Your Expenses (Official Form 106J) rour monthly expenses from line 22c of Schedule J | \$2,954.25 |

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Debtor 1 Christina Document Byrd Page 9 of 65
First Name Middle Name Last Name Page 9 of 65

Case Number (if known) _

| Part 4: | Answer These Questions for Administrative and Statistical Records | | | | | | |
|---|---|--------------|--|--|--|--|--|
| _ | Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes | | | | | | |
| Your famil | What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ 1,253.7 | | | | | | | |
| | e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : | Total claim | | | | | |
| From P | art 4 of Schedule E/F, copy the following: | | | | | | |
| 9a. Dom | estic support obligations (Copy line 6a.) | \$_0.00 | | | | | |
| 9b. Taxe | es and certain other debts you owe the government. (Copy line 6b.) | \$_0.00 | | | | | |
| 9c. Clain | ns for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_0.00 | | | | | |
| 9d. Stud | ent loans. (Copy line 6f.) | \$_60,281.00 | | | | | |
| 9e. Oblic priority c | \$_0.00 | | | | | | |
| 9f. Debt | s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$_0.00 | | | | | |
| 9g. Tota | I. Add lines 9a through 9f. | \$ 60,281.00 | | | | | |

| | Caso 19 | 2 05072 Doc 1 | Eilad 02/22/19 | Entered 02/23/18 1 | 7:34:43 Des | sc Main |
|---|---|---|---|---|--|--|
| Fill in this in | formation to ide | ntify your case and this fili | | 0 of 65 | 7.04.40 000 | o wan |
| Debtor 1 | Christina | | Byrd | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> Distric | ct of <u>ILLINOIS</u> | | | |
| Case Number | | | (State) | | [| Check if this is an |
| (If known) | | | | | | amended filing |
| Official F | <u>orm 106A</u> | <u>/B</u> | | | | |
| Schedul | e A/B: Pr | operty | | | | 12/15 |
| esponsible for ages, write you part 1: 01. Do you ow No. Yes. | supplying corre ur name and cas Describe Each Re un or have any le Describe | ct information. If more spa e number (if known). Answ sidence, Building, Land, or O gal or equitable interest in | ce is needed, attach a separa ver every question. Other Real Esate You Own or Ha any residence, building, land | d, or similar property? | | |
| | - | - | our entries fro Part 1, includi | | > | \$0.00 |
| Part 2: | Describe Your Vel | nicles | | | | · |
| O3. Cars, vans No. Yes. No. Yes. No. Yes. No. Yes. | Describe Describe Describe Describe Describe Describe | Ford Escape 2015 49,000 e with over 49,000 homes, ATVs and other recors, personal watercraft, fishing | Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is comm instructions) creational vehicles, other vehicles, snowmobiles, motorcycle | s and another unity property (see nicles, and accessories accessories | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on Schedule D: aims Secured by Property Current value of the portion you own? 17,175.00 |
| | | | our entries fro Part 2, includi | ng any entries for pages> | | \$ 17,175.00 |
| | | | | | | |
| Part 3: | Describe Your Per | sonal and Household Items | | | | |
| Do you own oi | have any legal | or equitable interest in any | r of the following items? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| Examples: | | ishings urniture, linens, china, kitchenw | are | | | |
| Yes. | Describe | Furniture, linens, small appliar | nces, table & chairs, bedroom set | | \$1,000 | \$1,000.00 |

Official Form 106A/B Record # 758932 Schedule A/B: Property Page 1 of 6

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— Document Page 11 of 55 Phumber (if known) Christina Case 18-05073 Doc 1

Debtor 1

Middle Name

Desc Main

| 07. | | Televisions and rac | lios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games | | |
|-----|------------------------------------|--|--|-------|---|
| | Yes. | Describe | TV, computer, printer, music collection, cell phone | \$800 | \$ 800.00 |
| 08. | Collectible | | | | |
| | | | nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles | | |
| | Yes. | Describe | | | \$ 0.00 |
| 09. | Examples: | ; carpentry tools; m | ic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | | · |
| | Yes. | Describe | | | \$0.00 |
| 10. | Firearms Examples: | Pistols, rifles, shoto | uns, ammunition, and related equipment | | |
| | Yes. | Describe | | | \$ 0.00 |
| 11. | Clothes Examples: No. | Everyday clothes, f | urs, leather coats, designer wear, shoes, accessories | | <u> </u> |
| | Yes. | Describe | Everyday clothes, shoes, accessories | \$100 | \$ <u> </u> |
| 12. | Jewelry Examples: gold, silver No. | Everyday jewelry, o | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | | |
| | Yes. | Describe | Everyday jewelry, costume jewelry, watch, earrings | \$100 | \$100.00 |
| 13. | Non-farm a Examples: No. | inimals Dogs, cats, birds, h | orses | | |
| | Yes. | Describe | | | \$0.00 |
| 14. | No. | | usehold items you did not already list, including any health aids you did not list | | |
| | Yes. | Describe | Books, CDs, DVDs & Family Photos | \$150 | \$ <u>150.0</u> 0 |
| | | | of your entries from Part 3, including any entries for pages you have attached | | \$2,150.00 |
| | | | | | |
| | aurt 44: | escribe Your Fin | | | |
| Do | you own or | have any legal | or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 16. | Examples: No. Yes. | Money you have in Describe | your wallet, in your home, in a safe deposit box, and on hand when you file your petition | | |
| | | | | | \$0.00 |

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17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No. Yes. Describe..... Account Type: Institution name: 0.00 Savings Account Chase Bank Chase Bank Checking Account 1,000.00 1,000.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Describe..... Institution or issuer name: Yes. 0.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in Describe..... Name of Entity and Percent of Ownership: Yes. 0.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders, Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No. Describe..... Issuer name: Yes 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Describe..... Type of account and Institution name: 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No. Describe..... Institution name or individual: Yes Security deposit on rental unit Richton Square Apartments 300.00 300.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No. Yes. Describe..... Issuer name and description: 0.00 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Describe..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers No. Yes. Describe..... 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No. Yes. Describe..... 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No. Yes. Describe..... 0.00

Christina Case 18-05073 Doc 1 Debtor 1

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Document P

Desc Main

Middle Name

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| Moi | ney or prop | erty owed to yo | u? | Current value of the portion you own? Do not deduct secured claims or exemptions |
|-----|---------------|--|--|--|
| 28. | Tax refund | s owed to you | | |
| | No. Yes. | Describe | | \$ 0.00 |
| 29. | Examples: | = | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement | |
| | Yes. | Describe | | \$ 0.00 |
| 30. | Examples: | urity benefits; unpa | wees you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, d loans you made to someone else | |
| | Yes. | Describe | | \$0.00 |
| 31. | | insurance polic Health, disability, o Describe | ies r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary: | |
| | 165. | Describe | Term life and health insurance \$ | \$ 0.00 |
| 32. | If you are th | | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive is died. | |
| | Yes. | Describe | | \$0.00 |
| 33. | _ | - | s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue | |
| | Yes. | Describe | | \$0.00 |
| 34. | No. | ingent and unlice Describe | uidated claims of every nature, including counterclaims of the debtor and rights | |
| 25 | _ | | id not already list | \$0.00 |
| 35. | No. | iai assets you d | id not already list | |
| | Yes. | Describe | | \$0.00 |
| 36. | Add the do | llar value of all | of your entries from Part 4, including any entries for pages you have attached | |
| | for Part 4. V | Vrite that number | er here | \$1,300.00 |
| | e1 5 G1 | | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. | No. | n or have any le | gal or equitable interest in any business-related property? | |
| | Yes. | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts r | eceivable or co | mmissions you already earned | |
| | Yes. | Describe | | \$0.00 |

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Document Page 14 of 5 umber (if known) Doc 1 Desc Main

Debtor 1 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No. Yes. Describe..... 0.00

\$0.00

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached

Christina Case 18-05073

63. Total of all property on Schedule A/B. Add line 55 + line 62

Doc 1

Desc Main

\$20,625.00

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Describe..... 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here -->

| Part 8: | List the Totals of Each Part of this Form | | |
|----------------------|---|--------------|--------------|
| 55. Part 1: 1 | Total real estate, line 2 | | \$ 0.00 |
| 56. Part 2: 1 | Total vehicles, line 5 | \$ 17,175.00 | |
| 57. Part 3: 1 | Total personal and household items, line 15 | \$ 2,150.00 | |
| 58. Part 4: 1 | Total financial assets, line 36 | \$ 1,300.00 | |
| 59. Part 5: 1 | Total business-related property, line 45 | \$ 0.00 | |
| 60. Part 6: 1 | Total farm- and fishing-related property, line 52 | \$ 0.00 | |
| 61. Part 7: 1 | Total other property not listed, line 54 | \$ 0.00 | |
| 62. Total per | rsonal property. Add lines 56 through 61 | \$ 20,625.00 | \$ 20,625.00 |
| | | | |

Official Form 106A/B Record # 758932 Page 6 of 6 Schedule A/B: Property

| | | | looumon t | 11000 16 Of 6 |
|---------------------|----------------------|-----------------------------------|----------------------|---------------|
| Fill in this in | formation to ident | ify your case: | | |
| | 01 | | 5 . | |
| Debtor 1 | Christina | | Byrd | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS | |
| | Zamapioy Court io | | (State) | |
| Case Number | r | | | |
| (If known) | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identif | y the Property You Claim as Exempt | | | |
|-------------------------|--|--------------------------------------|---|------------------------------------|
| Which set of exe | emptions are you claiming? Check | one only, even if your spo | ouse is filing with you. | |
| You are clair | ming state and federal nonbankrupto | cy exemptions . 11 U.S.C. | § 522(b)(3) | |
| You are clair | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| | | | | |
| For any property | y you list on <i>Schedule A/B</i> that yo | u claim as exempt, fill in t | the information below. | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | 2015 Ford Escape with over 49,000 miles | \$ <u>17,175</u> | \$ _ 2,400 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000 | \$ _ 1,000 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | TV, computer, printer, music collection, cell phone | \$_800 | \$_800 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday clothes, shoes, accessories | \$100 | \$100 | 735 ILCS 5/12-1001(a),(e) |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| Official Form 106C | Record # 758932 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 |

Debtor 1 Christina

Dogument

Page 17 of 65 Number (if known)

Last Name First Name Middle Name

| | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|----------------------------|---|--------------------------------------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Everyday jewelry, costume jewelry, watch, earrings | \$ <u>100</u> | \$ <u>100</u> | 735 ILCS 5/12-1001(a),(e) |
| Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Books, CDs, DVDs & Family Photos | \$ <u>150</u> | \$ <u>150</u> | 735 ILCS 5/12-1001(a) |
| Line from Schedule A/B: | 14 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Savings Account, Chase Bank, 0.00 | \$_ ⁰ | \$_0 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Checking Account, Chase Bank, 1,000.00 | \$ <u>1,000</u> | \$ 1,000 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Security deposit on rental unit, Richton Square Apartments, 300.00 | \$_300 | \$_300 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 22 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Term life and health insurance | \$_ ⁰ | \$_0 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 31 | | 100% of fair market value, up to any applicable statutory limit | |
| Subject to adjus | g a homestead exemption of more street on 4/01/19 and every 3 years acquire the property covered by the | after that for cases filed o | | |

| Fill in this in | Caso 19 Of | | c 1 Filad 02/22/19 | Entered 02/23/18 8 of 65 | 3 17:34:43 | Desc Main | |
|-----------------------|--|---|---|---------------------------------|--|--|--------------------------|
| Debtor 1 | Christina | | Byrd | | | | |
| Debior 1 | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for the | : <u>NORTHERN</u> | District of <u>ILLINOIS</u> | | | | |
| Case Number | | | (State) | | | Check if this | is an |
| (If known) | | | | | | amended fili | ng |
| Official F | orm 106D | | | | | | |
| Schedule | D: Creditors | Who Have | Claims Secured by I | Property | | | 12/15 |
| 1. Do any cred No. Ch | s, write your name ar ditors have claims se | d case number (cured by your pr nit this form to the on below. | • | | · | | |
| | | | | | Column A | Column A | Column C |
| for each cl | aim. If more than one | creditor has a pa | n one secured claim, list the creditor rticular claim, list the other creditors all order according to the creditors na | s in Part 2. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Capital | ONE AUTO Finan | | Describe the property that secur | es the claim: | <u>\$ 20,217.00</u> | \$ 17,175.00 | \$ <u>3,042.00</u> |
| Creditor's | | | 2015 Ford Escape with over 49, | 000 miles |] | | |
| 3901 Da | allas Pkwy Street | | | | | | |
| Number | Sueet | | As of the date you file, the claim | ie: Check all that apply | _ | | |
| | | | Contingent | із. Опеск ан шасарріу. | | | |
| Plano | | X 75093 | Unliquidated | | | | |
| City | S | tate Zip Code | Disputed | | | | |
| Who owes | the debt? Check one. | | Nature of Lien. Check all that appl | y. | | | |
| Debtor | • | | An agreement you made (such a | s mortgage or secured | | | |
| Debtor | - | | car loan) | acabaniala lian) | | | |
| = | 1 and Debtor 2 only one of the debtors and a | nother | Statutory lien (such as tax lien, n Judgment lien from a lawsuit | nechanic's lien) | | | |
| At loast | one of the debtors and a | nounci | Other (including a right to offset) | | | | |
| | if this claim relates to | a | | | | | |
| | unity debt was incurred ²⁰¹ | 5-02-26 | Last 4 digits of account number | 1001 | | | |
| | List Others to Be Notifi | ed for a Debt That | - | | | | |
| | | | | | | | |
| trying to collect | from you for a debt yo | ou owe to someon that you listed in l | ut your bankruptcy for a debt that yo e else, list the creditor in Part 1, and Part 1, list the additional creditors he | then list the collection agency | here. Similarly, if yo | u have more | |
| , | | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 20,217.00

| | | Caco 19 05072 | Doc 1 | Filed 02/22/19 | Entered 02/23/18 17:34:4 | 3 Desc N | ⁄/ain |
|--|---|---|---|--|--|------------------------------------|-----------------------------------|
| Filli | n this inf | ormation to identify your case: | : | | 9 of 65 | | |
| Dob | tor 1 | Christina | | Byrd | | | |
| Deb | tor 1 | | dle Name | Last Name | | | |
| Deb | tor 2 | | | | | | |
| (Spou | se, if filing) | First Name Mide | dle Name | Last Name | | | |
| Unit | ed States I | Bankruptcy Court for the : <u>NORTH</u> | IERN District | t of <u>ILLINOIS</u> | | | |
| | | | | (State) | | Пс | heck if this is an |
| | e Number _. nown) | | | | | | nended filing |
|)ffic | ial Fo | orm 106E/F | | | | | · · |
| | | | | | | | 12/15 |
| se as c ist the I/B: Pr redito eeded | omplete other pa operty (C rs with pa , copy th iny additi | rty to any executory contracts Official Form 106A/B) and on So artially secured claims that are | Part 1 for cre or unexpires chedule G: E listed in Sch ber the entri nd case num | editors with PRIORITY claim d leases that could result in executory Contracts and Une nedule D: Creditors Who Haves in the boxes on the left. A | s and Part 2 for creditors with NONPRIORIT a claim. Also list executory contracts on So xpired Leases (Official Form 106G). Do not re Claims Secured by Property. If more spa attach the Continuation Page to this page. O | chedule t include any ace is | |
| 1. Do | any cred | litors have priority unsecured o | claims agains | st you? | | | |
| | No. Go | to Part 2. | | - | | | |
| ┌ | | | | | | | |
| ea no un: | ch claim l npriority a secured o | isted, identify what type of claim amounts. As much as possible, li claims, fill out the Continuation P | it is. If a clair ist the claims age of Part 1 | m has both priority and nonpring in alphabetical order according the formula of the following that the following the following in the following the followin | ecured claim, list the creditor separately for e iority amounts, list that claim here and show I ing to the creditor's name. If you have more the lds a particular claim, list the other creditors i | both priority and nan two priority | |
| ((() | л ап ехрі | anation of each type of claim, se | ee the mstruc | | Total cla | nim Priority | y Nonpriority |
| | | | | | | amoun | t amount |
| Pari | 2# L | ist All of Your NONPRIORITY Uns | secured Claim | 15 | | | |
| 3. Do | any cred | litors have nonpriority unsecur | red claims ag | gainst you? | | | |
| | No. You | have nothing to report in this pa | art. Submit tl | his form to the court with your | other schedules. | | |
| | Yes. | | | | | | |
| no | npriority ul | insecured claim, list the creditor | separately for holds a particular | or each claim. For each claim | or who holds each claim. If a creditor has mulisted, identify what type of claim it is. Do not itors in Part 3.If you have more than three no | list claims already | |
| 4.4 | Advocat | e Christ Medical Center | La | st 4 digits of account number | | | Total claim \$ 8,000.00 |
| 4.1 | Creditor's N | | _ La: | st 4 digits of account number | | | <u> </u> |
| | PO Box | | _ Wh | nen was the debt incurred? | | | |
| | Number | Street | | af the state over file the state. | to Otrodo all the control | | |
| | | | - Äs | of the date you file, the claim Contingent | із. Спеск ан шасарріу. | | |
| | Chicago | IL 60673 | - П | Unliquidated | | | |
| W | City /ho owes | State Zip Cod the debt? Check one. | de \Box | Disputed | | | |
| | Debtor 1 | only | | | | | |
| | Debtor 2 | only | Ту | pe of NONPRIORITY unsecure | d claim: | | |
| | Debtor 1 | and Debtor 2 only | | Student loans | | | |
| | At least | one of the debtors and another | Ш | Obligations arising out of a separate | | | |
| | _ | f this claim relates to a | | that you did not report as priority | | | |
| ļs | | nity debt n subject to offest? | Ц | Debts to pension or profit-sharing | g pians, and other similar debts | | |
| | No | | | Other. Specify Medical/Den | tal Services | | |
| F | Yes | | | Cariot. Opening | | | |

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 20 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Capital ONE BANK USA N.A. \$ 896.00 Last 4 digits of account number Creditor's Name 2014-2014 120 Corporate Blvd Ste 1 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Norfolk 23502 VA Unliquidated City Zip Code State Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Unknown Credit Extension Yes COMENITY BANK/Ashstwrt NULL \$ 529.00 Last 4 digits of account number 4.3 2015-2017 Po Box 182789 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent OH 43218 Columbus Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another

that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___ Credit Card or Credit Use COMENITY BANK/Avenue **NULL** \$ 158.00 4.4 Last 4 digits of account number Creditor's Name 2016-2017 Po Box 182789 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Columbus OH 43218 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify ___Credit Card or Credit Use

Official Form 106E/F

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 21 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.5 COMENITY BANK/Carsons | Last 4 digits of account number | NULL | \$ <u>150.00</u> | | | |
|---|---|-------------------------------|------------------|--|--|--|
| Creditor's Name | _ | 0040 0047 | | | | |
| Po Box 182789 | When was the debt incurred? | 2016-2017 | | | | |
| Number Street | | | | | | |
| | As of the date you file, the claim is: | : Check all that apply. | | | | |
| | Contingent | | | | | |
| Columbus OH 43218 | Unliquidated | | | | | |
| City State Zip Code Who owes the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | _ | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | | |
| At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority cla | aims | | | | |
| community debt | Debts to pension or profit-sharing p | lans, and other similar debts | | | | |
| Is the claim subject to offest? | | | | | | |
| No | Other. Specify Credit Card or | Credit Use | | | | |
| Yes 4.6 COMENITY BANK/Lnbryant | Lost 4 digita of account number | NULL | \$ 768.00 | | | |
| Creditor's Name | Last 4 digits of account number _ | | \$ <u></u> | | | |
| Po Box 182789 | When was the debt incurred? | 2009-2017 | | | | |
| Number Street | | | | | | |
| | As of the date you file, the claim is | · Check all that apply | | | | |
| | Contingent | . Oncok dir triat appry. | | | | |
| Columbus OH 43218 | Unliquidated | | | | | |
| City State Zip Code | Disputed | | | | | |
| Who owes the debt? Check one. | | | | | | |
| Debtor 1 only | - (1101175107517) | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separat | ion agreement or diverse | | | | |
| | that you did not report as priority cla | | | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing p | | | | | |
| Is the claim subject to offest? | Bobie to periode or prome sharing p | iane, and one of similar door | | | | |
| No | Other. Specify Credit Card or | Credit Use | | | | |
| Yes | | | | | | |
| 4.7 Comenitycb/HSN | Last 4 digits of account number | NULL | \$ <u>701.00</u> | | | |
| Creditor's Name Po Box 182120 | When was the debt incurred? | 2016-2017 | | | | |
| Number Street | when was the dept incurred: | | | | | |
| Nulliber Street | | | | | | |
| | As of the date you file, the claim is: | : Check all that apply. | | | | |
| Columbus OH 43218 | Contingent | | | | | |
| City State Zip Code | Unliquidated | | | | | |
| Who owes the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | | | | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | | | | | |
| At least one of the debtors and another | Obligations arising out of a separat | | | | | |
| Check if this claim relates to a | that you did not report as priority cla | | | | | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing p | lans, and other similar debts | | | | |
| No | Other. Specify Credit Card or | Credit Use | | | | |
| Yes | Other. Specify Stout Safe of | | | | | |

Record # 758932

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 22 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.8 DEPT OF ED/Navient | Last 4 digits of account number 0606 | \$ <u>1,578.00</u> |
|---|---|--------------------|
| Creditor's Name | | |
| Po Box 9635 | When was the debt incurred? 2012-2017 | |
| Number Street | | |
| | | |
| | As of the date you file, the claim is: Check all that apply. | |
| Million Dame DA 40770 | Contingent | |
| Wilkes Barre PA 18773 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| | | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Dobbe to periodic or profit of all may plaine, and other orininal dobbe | |
| No | Other Specify | |
| Yes | Other. Specify | |
| DEDT OF FD/Novient | Last 4 digits of account number0609 | \$ 1,865.00 |
| Creditor's Name | Last 4 digits of account number | Ψ,σσσ.σσ |
| Po Box 9635 | When was the debt incurred? 2015-2017 | |
| | When was the dest incurred: | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Wilkes Barre PA 18773 | Unliquidated | |
| City State Zip Code | | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | _ | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | _ | |
| No | Other. Specify | |
| Yes DEPT OF ED/Naviont | | • 2.076.00 |
| 4.10 DEPT OF ED/Navient | Last 4 digits of account number 0308 | \$ <u>2,076.00</u> |
| Creditor's Name | When was the debt incurred? 2010-2017 | |
| Po Box 9635 | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Wilkes Barre PA 18773 | | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | _ | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | <u>_</u> | |
| No | Other. Specify | |
| Yes | | |

Record # 758932

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 23 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.11 DEPT OF ED/Navient | Last 4 digits of account number 0909 | \$ <u>2,342.00</u> | | | |
|---|---|--------------------|--|--|--|
| Creditor's Name | | | | | |
| Po Box 9635 | When was the debt incurred? 2014-2017 | | | | |
| Number Street | | | | | |
| Number Succe | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | |
| | Contingent | | | | |
| Wilkes Barre PA 18773 | | | | | |
| City State Zip Code | Unliquidated | | | | |
| Who owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offest? | Debts to pension of profit-straining plans, and other similar debts | | | | |
| | _ | | | | |
| No | Other. Specify | | | | |
| Yes | | | | | |
| 4.12 DEPT OF ED/Navient | Last 4 digits of account number 0609 | \$ <u>2,342.00</u> | | | |
| Creditor's Name | | | | | |
| Po Box 9635 | When was the debt incurred? 2015-2017 | | | | |
| Number Street | | | | | |
| Number | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | |
| | Contingent | | | | |
| Wilkes Barre PA 18773 | Unliquidated | | | | |
| City State Zip Code | | | | | |
| Who owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| | Toward NONDRIODITY and a second of a later | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offest? | Debts to pension of pront-snaring plans, and other similar debts | | | | |
| - | | | | | |
| No | Other. Specify | | | | |
| Yes | 2122 | | | | |
| 4.13 DEPT OF ED/Navient | Last 4 digits of account number 0126 | <u>\$_2,624.00</u> | | | |
| Creditor's Name | | | | | |
| Po Box 9635 | When was the debt incurred? 2016-2017 | | | | |
| Number Street | | | | | |
| | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | |
| | Contingent | | | | |
| Wilkes Barre PA 18773 | Unliquidated | | | | |
| City State Zip Code | | | | | |
| Who owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| · = | | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offest? | | | | | |
| No | Other Creek | | | | |
| Yes | Other. Specify | | | | |
| Yes | | | | | |

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 24 of 65 **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.14 | DEPT OF ED/Navient | Last 4 digits of account number | 0126 | \$ _3,373.00 | | | |
|------|--|--|------------------------------|---------------------|--|--|--|
| | Creditor's Name | · _ | | | | | |
| | Po Box 9635 | When was the debt incurred? | 2016-2017 | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: | Check all that apply. | | | | |
| | | Contingent | | | | | |
| | Wilkes Barre PA 18773 | Unliquidated | | | | | |
| , | City State Zip Code Who owes the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | _ | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured c | elaim: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | |
| i | Check if this claim relates to a | that you did not report as priority claims | | | | | |
| ' | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | | | | |
| | s the claim subject to offest? | _ | | | | | |
| | No No | Other. Specify | | | | | |
| 4 15 | Yes DEPT OF ED/Navient | Last 4 digits of account number | 0909 | \$ 3,477.00 | | | |
| 4.15 | Creditor's Name | Last 4 digits of account number | | <u> </u> | | | |
| | Po Box 9635 | When was the debt incurred? | 2014-2017 | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: | Check all that apply. | | | | |
| | | Contingent | | | | | |
| | Wilkes Barre PA 18773 | Unliquidated | | | | | |
| Ι, | City State Zip Code Who owes the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured c | elaim: | | | | |
| i | Debtor 1 and Debtor 2 only | Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation | on agreement or divorce | | | | |
| | Check if this claim relates to a | that you did not report as priority cla | ims | | | | |
| ' | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | | | | |
| | s the claim subject to offest? | _ | | | | | |
| | No | Other. Specify | | | | | |
| 4.40 | Yes DEPT OF ED/Navient | Last 4 digits of account number | 0607 | \$ 4,400.00 | | | |
| 4.16 | Creditor's Name | Last 4 digits of account number | | <u> </u> | | | |
| | Po Box 9635 | When was the debt incurred? | 2016-2017 | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: | Check all that apply. | | | | |
| | | Contingent | | | | | |
| | Wilkes Barre PA 18773 | Unliquidated | | | | | |
| Ι, | City State Zip Code Who owes the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured c | elaim: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation | on agreement or divorce | | | | |
| | Check if this claim relates to a | that you did not report as priority cla | | | | | |
| ' | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | | | | |
| | s the claim subject to offest? | _ | | | | | |
| | No No | Other. Specify | | | | | |
| 1 | Yes | | | | | | |

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 25 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.17 DEPT OF ED/Navient | Last 4 digits of account number | 0124 | \$ 4,635.00 |
|--|---|--------------------------------|--------------------|
| Creditor's Name | | 2012 2017 | |
| Po Box 9635 | When was the debt incurred? | 2012-2017 | |
| Number Street | | | |
| | As of the date you file, the claim is: | : Check all that apply. | |
| Wilkes Barre PA 18773 | Contingent | | |
| Wilkes Barre PA 18773 City State Zip Code | Unliquidated | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority cla | | |
| community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| Is the claim subject to offest? | | | |
| Yes | Other. Specify | | |
| 4.18 DEPT OF ED/Navient | Last 4 digits of account number | 0911 | \$ 4,714.00 |
| Creditor's Name | _ | | |
| Po Box 9635 | When was the debt incurred? | 2012-2017 | |
| Number Street | | | |
| | As of the date you file, the claim is | : Check all that apply. | |
| William Barra BA 40770 | Contingent | | |
| Wilkes Barre PA 18773 City State Zip Code | Unliquidated | | |
| City State Zip Code Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority cla | aims | |
| community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| Is the claim subject to offest? | Пан а ж | | |
| Yes | Other. Specify | | |
| 4.19 DEPT OF ED/Navient | Last 4 digits of account number | 0910 | \$ 4,744.00 |
| Creditor's Name | | 0040 0047 | |
| Po Box 9635 | When was the debt incurred? | 2013-2017 | |
| Number Street | | | |
| | As of the date you file, the claim is: | : Check all that apply. | |
| Wilkes Barre PA 18773 | Contingent | | |
| City State Zip Code | Unliquidated | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separat | | |
| Check if this claim relates to a | that you did not report as priority cla | | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing p | olans, and other similar debts | |
| No | Other Specify | | |
| Yes | Other. Specify | | |

| Debtor 1 | Case 18-05 | 5073 D | oc 1 | Filed 02/23/18 Document | | /23/18 17:34:4 | | Desc Main | | |
|--|---|-------------|--------|----------------------------|--------|----------------|--|-----------|--|--|
| | First Name | Middle Name | | Last Name | | | | | | |
| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | | | | | |
| After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. | | | | | | | | | | |
| | | | | | | | | | | |
| 4.20 | DEPT OF ED/Navient | | Last 4 | 4 digits of account numbe | r 0124 | | | | | |

| listing any entries on this page, number them | arging man ara, tollowed by 4.0, c | | I otal Claim |
|--|--|--------------------------------|--------------------|
| DEPT OF ED/Navient | Last 4 digits of account number _ | 0124 | \$ <u>6,940.00</u> |
| Creditor's Name Po Box 9635 | When was the debt incurred? | 2012-2017 | |
| Number Street | Then was the dest mountain. | | |
| | A - of the data way file the plains i | Observation all that are dis | |
| | As of the date you file, the claim is | s: Спеск ан that apply. | |
| Wilkes Barre PA 18773 | Contingent | | |
| City State Zip Code | Unliquidated | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separa | - | |
| Check if this claim relates to a | that you did not report as priority o | | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing | plans, and other similar debts | |
| No | — | | |
| Yes | Other. Specify | | |
| DEPT OF ED/Navient | Last 4 digits of account number _ | 0910 | \$ 6,979.00 |
| Creditor's Name | | _ | • |
| Po Box 9635 | When was the debt incurred? | 2013-2017 | |
| Number Street | | | |
| | As of the date you file, the claim is | s. Check all that annly | |
| | Contingent | S. Orlect an trial apply. | |
| Wilkes Barre PA 18773 | Unliquidated | | |
| City State Zip Code | | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separa | ation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority of | claims | |
| community debt | Debts to pension or profit-sharing | plans, and other similar debts | |
| Is the claim subject to offest? | _ | | |
| No Transfer of the second of t | Other. Specify | | |
| Yes DEPT OF ED/Navient | Last 4 digits of account murch | 0911 | \$ 8,192.00 |
| Creditor's Name | Last 4 digits of account number _ | | φ <u>σ,132.33</u> |
| Po Box 9635 | When was the debt incurred? | 2012-2017 | |
| Number Street | | | |
| | A | or Ohard Million and | |
| | As of the date you file, the claim is | s: Check all that apply. | |
| Wilkes Barre PA 18773 | Contingent | | |
| City State Zip Code | Unliquidated | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separa | ation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority of | claims | |
| community debt | Debts to pension or profit-sharing | plans, and other similar debts | |
| Is the claim subject to offest? | | | |
| No | Other. Specify | | |
| Yes | | | |

Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Case 18-05073 Page 27 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** 4 23 HSBC BANK Nevada N.A. \$ 2,342.00 Last 4 digits of account number

| 4.23 | | Last 4 digits of account number | T |
|---|------------------|---|------------------|
| Creditor's Name 2365 Northside Dr St | to 30 | When was the debt incurred? 2015-2015 | |
| Number Street | le 50 | WHEN WAS THE GEST HIGHTEGT: | |
| Trainbo. | | As of the date you file the plain in Obest all that and | |
| | | As of the date you file, the claim is: Check all that apply. | |
| San Diego | CA 92108 | Contingent | |
| City | State Zip Code | Unliquidated | |
| Who owes the debt? Ch | eck one. | Disputed | |
| Debtor 1 only | | | |
| Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 | - | Student loans | |
| At least one of the deb | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Check if this claim re community debt | elates to a | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to o | ffest? | Debts to pension of profestialing plans, and other similar debts | |
| No | | Other. Specify Unknown Credit Extension | |
| Yes | | | |
| 4.24 Illinois State Toll Hwy | y Auth | Last 4 digits of account number | \$ <u>304.00</u> |
| Creditor's Name | | When we do do to the comments | |
| 2700 Ogden Ave. | | When was the debt incurred? | |
| Number Street | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| Downers Grove | IL 60515-1703 | Contingent | |
| City | State Zip Code | Unliquidated | |
| Who owes the debt? Ch | | Disputed | |
| Debtor 1 only | | | |
| Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 | only | Student loans | |
| At least one of the deb | tors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim re | elates to a | that you did not report as priority claims | |
| community debt Is the claim subject to o | iffest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | most. | Other. Specify Fines | |
| Yes | | Offier. Specify | |
| 4.25 LANE BRYANT RET | AIL/SOA | Last 4 digits of account number NULL | \$ <u>0.00</u> |
| Creditor's Name | | 2000 2040 | |
| 450 Winks Ln | | When was the debt incurred? 2009-2010 | |
| Number Street | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| Bensalem | PA 19020 | Contingent | |
| City | State Zip Code | Unliquidated | |
| Who owes the debt? Ch | | Disputed | |
| Debtor 1 only | | | |
| Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 | only | Student loans | |
| At least one of the deb | tors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim re | elates to a | that you did not report as priority claims | |
| community debt | #**** | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to o | mestf | Cradit Card or Cradit Llag | |
| Yes | | Other. Specify Credit Card or Credit Use | |
| | | | |

Record # 758932

Document Page 28 of 65 Case Number (if known) Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them b | beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|-----------|---|--|--------------------|
| 4.26 | Midwest Diagnostic Pathology | Last 4 digits of account number | \$ _941.00 |
| 1.20 | Creditor's Name | | |
| | 75 Remittance Dr., Ste. 3070 | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60675 | Unliquidated | |
| ١,, | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| " | | | |
| | Debtor 1 only | Toward MONDRIODITY and a delivery | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| L | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | s the claim subject to offest? | Debts to pension of profit-sharing plans, and other similar debts | |
| | No | Other. Specify Medical/Dental Services | |
| | Yes | Officer, Specify | |
| 4.27 | Navient Solutions INC | Last 4 digits of account number 0308 | \$ <u>0.00</u> |
| | Creditor's Name | 0040 0040 | |
| | 11100 Usa Pkwy | When was the debt incurred? 2010-2010 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | _ | Contingent | |
| | Fishers IN 46037 | Unliquidated | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | = | that you did not report as priority claims | |
| 4 | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | s the claim subject to offest? | Debte to period of profit offaring plane, and other offinial debte | |
| | No | Other. Specify | |
| | Yes | | |
| 4.28 | NAVY Federal CR Union | Last 4 digits of account number NULL | \$ <u>1,331.00</u> |
| | Creditor's Name | When was the debt incurred? 2016-2017 | |
| | Po Box 3700 | When was the debt incurred? 2016-2017 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Merrifield VA 22119 | Unliquidated | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | _ | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| L | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| Ī | Yes | Guior. Specify | |

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| After listing any entries on this page, number the | em beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|--|---|------------------|
| 4.29 Secretary of State | Last 4 digits of account number | \$ <u>0.00</u> |
| Creditor's Name 2701 S. Dirksen Pkwy. | When was the debt incurred? | |
| Number Street | Their was the dest incurred: | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Springfield IL 62723 | Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. Debtor 1 only | Disputed | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Student loans | |
| Debtor 1 and Debtor 2 only | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | Metico Only | |
| = | Other. Specify Notice Only | |
| Yes Sullivan Urgent Aid Center | Last 4 digits of account number | \$ 340.00 |
| Creditor's Name | Last 4 digits of account number | \$ |
| PO Box 87844 | When was the debt incurred? | |
| Number Street | | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| 0-0-1 01-1-1-1 | Contingent | |
| Carol Stream IL 60188 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| | Town (NONDRIGHTY | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Medical/Dental Services | |
| Yes Symph (OVC | A MIIII | A 750 00 |
| Syncb/QVC | Last 4 digits of account number NULL | \$ <u>756.00</u> |
| Creditor's Name | When was the debt incurred? 2015-2017 | |
| Po Box 965018 | When was the debt incurred? 2015-2017 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Orlando FL 32896 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | _ | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ri ri | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| ■ No | Other. Specify Credit Card or Credit Use | |
| Yes | | |

Page 30 of 65 Case Number (if known) **Document** Christina Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Syncb/Walmart \$ 434.00 Last 4 digits of account number _ Creditor's Name 2016-2017 Po Box 965024 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 32896 Orlando Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Yes \$ 250.00 T-Mobile 4.33 Last 4 digits of account number Creditor's Name PO Box 742596 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent OH 45274-2596 Cincinnati Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Utility Bills/Cellular Service Other. Specify _ Yes TD BANK USA/Targetcred **NULL** \$ 326.00 Last 4 digits of account number 4.34 Creditor's Name 2015-2017 Po Box 673 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Minneapolis 55440 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Credit Card or Credit Use Other. Specify _ List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Schedule E/F: Creditors Who Have Unsecured Claims

Christina Debtor 1

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|-----------------------------|--|------------|-------------------------|
| Total claims | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | |
| | | | Total claim |
| Total claims | 6f. Student loans | 6f. | Total claim \$60,281.00 |
| Total claims from Part 2 | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | 20.004.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$ 60,281.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other | 6g. | \$ |

| Fill | in this inf | | Q 05072 Do | oc 1 Eil | od 02/22/19 | Ento | red 02/23 2 of 65 | 3/18 17:34 | 4:43 | Desc Main | |
|--|--------------------------------------|--|---|--|-------------------------|------------|----------------------|-------------------|---------------|-------------|-----------|
| | | | | | | | 2 01 03 | | | | |
| Deb | otor 1 | Christina | | | Byrd | | | | | | |
| Dah | stor O | First Name | Middle Name | | Last Name | | | | | | |
| | otor 2 use, if filing) | First Name | Middle Name | | Last Name | | | | | | |
| Unit | ted States I | Bankruntey Court | for the : <u>NORTHERN</u> | District of ILI | INOIS | | | | | | |
| | | | 101 tile : <u>1101(1112)(11</u> | _ Didition of _ <u>iEE</u> | (State) | | | | | Check if th | nis is an |
| | nown) | | | | | | | | | amended | |
| Offic | cial Fo | orm 1060 | 3 | | | | | | | | - |
| | | | <u>-</u> tory Contract | e and H | nevnired Lea | 202 | | | | | 12/15 |
| Be as on the second sec | complete ation. If m nal pages | and accurate a nore space is no s, write your na | s possible. If two marn eeded, copy the additi me and case number y contracts or unexpir | ried people ar ional page, fil (if known). | e filing together, bot | h are equa | | | | / | |
| | No. Che | eck this box and | submit this form to the | e court with yo | our other schedules. Y | ou have no | othing else to re | eport on this for | m. | | |
| | Yes. Fill | in all of the info | rmation below even if | the contracts of | or leases are listed in | Schedule / | A/B: Property (| Official Form 10 | 06A/B) | | |
| exa | | nt, vehicle leas | n or company with wh e, cell phone). See the | | | | | | | | |
| P | erson or | company with v | whom you have the co | ontract or leas | se | | State w | hat the contrac | ct or lease i | is for | |
| 2.1 | Richton | Square Apartm | ents | | | _ | Lesse | e | | | |
| | Name 22300 R | Richton Square F | Rd | | | | | | | | |
| | Number | Street | - | | | _ | | | | | |
| | Richton | Park | | IL 60471 | | _ | | | | | |
| 2.2 | City | | | State Zip Cod | le | | | | | | |
| 2.2 | Name | | | | | - | | | | | |
| | | | | | | _ | | | | | |
| | Number | Street | | | | | | | | | |
| | City | | | State Zip Cod | le | - | | | | | |
| 2.3 | | | | | | | | | | | |
| 2.0 | Name | | | | | - | | | | | |
| | | | | | | _ | | | | | |
| | Number | Street | | | | | | | | | |
| | City | | | State Zip Cod | le | - | | | | | |
| | | | | | | | | | | | |
| 2.4 | | | | | | _ | | | | | |
| | Name | | | | | | | | | | |
| | Number | Street | | | | _ | | | | | |
| | City | | | State Zip Cod | le | _ | | | | | |
| 2.5 | | | | | | | | | | | |
| <u> </u> | Name | | | | | - | | | | | |
| | Number | Street | | | | _ | | | | | |

State Zip Code

City

| Fill in this in | nformation to iden | tify your case: | |
|---------------------|---------------------|---------------------------------------|-----------------|
| Debtor 1 | Christina | | Byrd |
| | First Name | Middle Name | Last Name |
| Debtor 2 | - | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number | r | | (Glate) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A | any Additional Pages, write your name and case number (if known). Answer every question. | | | | | | | | |
|-------------|--|--|-------------------------------|---------------------|--|--|--|--|--|
| 1. D | 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) | | | | | | | | |
| | No. | | | | | | | | |
| | Yes | | | | | | | | |
| | 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Lousiiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) | | | | | | | | |
| | No. Go to line 3. | | | | | | | | |
| | Yes. Did your sp | ouse, former spouse, or legal ec | uivalent live with you at the | time? | | | | | |
| | _ | n community state or territory die | d you live? | Fill in the n | ame and current address of that person. | | | | |
| | Name of your spo | use, former spouse or legal equivalent | | | | | | | |
| | Number St | reet | | | | | | | |
| | City | | State | Zip Code | | | | | |
| 3 In | - | f vour codebtors. Do not inclu | | • | is filing with you. List the person | | | | |
| | | Form 106D), Schedule E/F (Off edule G to fill out Column 2. debtor | icial Form 106E/F), or Sche | dule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply: | | | | |
| 3.1 | | | | | Schedule D, line | | | | |
| | Name | | | _ | Schedule E/F, line | | | | |
| | Number Stre | et | | | Schedule G, line | | | | |
| | City | S | tate Z | Zip Code | | | | | |
| 3.2 | | | | _ | Schedule D, line | | | | |
| | Name | | | _ | Schedule E/F, line | | | | |
| | Number Stre | et | | _ | Schedule G, line | | | | |
| | City | S | tate Z | Zip Code | _ | | | | |
| 3.3 | | | | _ | Schedule D, line | | | | |
| | Name | | | _ | Schedule E/F, line | | | | |
| | Number Stre | et | | | Schedule G, line | | | | |
| | City | S | tate Z | Zip Code | | | | | |

Official Form 106H Record # 758932 Schedule H: Your Codebtors Page 1 of 1

| Fill in this in | nformation to ident | | 12(1) | |
|---------------------|----------------------|----------------------------------|-------------|---|
| Debtor 1 | Christina | | Byrd | _ |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | _ |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for | the : <u>NORTHERN DISTRICT C</u> | OF ILLINOIS | |
| | r | | | |
| (If known) | | | | |
| | | | | |
| | | | | |

Official Form 106I

MM / DD / YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment | | | | |
|----|---|---------------------------------|---------------------------|--------------|-----------------------------------|
| 1. | Fill in your employment information | | Debtor 1 | | Debtor 2 or non-filing spouse |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employed | 1 | Employed Not employed |
| | Include part-time, seasonal, or self-employed work. | Occupation | Delivery | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name | Shipt | | |
| | | Employers address | 17 20th St. N Suit | e 100 | |
| | | | Birmingham, AL 3 | 35203 | , |
| | | How long employed there? | 01 | | |
| | | now long employed there: | Since 10/1/2017 | | |
| Pa | rt 2: Give Details About Monthly | y Income | | | |
| | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse have lines below. If you need more space. | ve more than one employer, comb | ine the information for a | | , , |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | List monthly gross wages, salary deductions). If not paid monthly, c | | - | \$0.00 | \$0.00 |
| 3. | 3. Estimate and list monthly overtime pay. | | | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line | 2 + line 3. | | \$0.00 | \$0.00 |

 Official Form 106I
 Record #
 758932
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Christin

Christina Document Byrd

First Name Middle Name Last Name

Case Number (if known) _

| | | | | For Debtor 1 | | r Debtor 2 or n-filing spouse | | |
|---------------|--------------|---|------------------|---------------------------|----------|----------------------------------|----------|------------|
| | Сору | y line 4 here | 4. | \$0.00 | | \$0.00 | | |
| 5. L | ist all | payroll deductions: | _ | _ | | | | |
| | 5a. T | ax, Medicare, and Social Security deductions | 5a. | \$0.00 | | \$0.00 | | |
| | 5b. N | Mandatory contributions for retirement plans | 5b. | \$0.00 | | \$0.00 | | |
| | 5c. V | oluntary contributions for retirement plans | 5c. | \$0.00 | | \$0.00 | | |
| | 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | | |
| | 5e. I | nsurance | 5e. | \$0.00 | | \$0.00 | | |
| | 5f. C | Oomestic support obligations | 5f. | \$0.00 | | \$0.00 | | |
| | 5g. L | Jnion dues | 5g. | \$0.00 | | \$0.00 | | |
| | 5h. C | Other deductions. Specify: | 5h. | \$0.00 | | \$0.00 | | |
| 6. A | dd the | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$0.00 | | \$0.00 | | |
| 7. C | alcula | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | \$0.00 | | |
| 8. L i | st all | other income regularly received: | _ | | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | |
| | | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$875.00 | | \$0.00 | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 367.07 | | \$ 0.00 | | |
| | | dependent regularly receive | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$2,290.00 | | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | |
| | | Include cash assistance and the value (if known) of any non-cash | _ | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | | | | | | |
| | 8g. | Pension or retirement income | 8g. _ | \$0.00 | | \$0.00 | | |
| | 8h. | Other monthly income. Specify: | 8h | \$0.00 | | \$0.00 | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9 | \$3,532.07 | _ | \$0.00 | | |
| 10. | | ulate monthly income. Add line 7 + line 9. | 10. | \$3,532.07 + | | \$0.00 = | : Г | \$3,532.07 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | _ | | | | _ | |
| 11. | State | e all other regular contributions to the expenses that you list in Schedule | ⊋ J . | | | | | |
| | Inclu | de contributions from an unmarried partner, members of your household, you | our depender | nts, your roommates, and | t | | | |
| | othe | r friends or relatives. | | | | | | |
| | | ot include any amounts already included in lines 2-10 or amounts that are n | | o pay expenses listed in | Sche | dule J. | | |
| | Spec | jify: | | | | • | 11. – | \$0.00 |
| 12. | Add | the amount in the last column of line 10 to the amount in line 11. The res | sult is the con | nbined monthly income. | | | г | |
| | Write | e that amount on the Summary of Schedules and Statistical Summary of Ce | ertain Liabiliti | es and Related Data, if i | t applie | s | 12. | \$3,532.07 |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | ? | | | | | |
| | χ | | | | | | | |
| | | Yes. Explain: | | | | | | |
| | | | | | | | | |

Entered 02/23/18 17:34:43 Case 18-05073 Doc 1 Filed 02/23/18 Desc Main Document Page 36 of 65 Fill in this information to identify your case: Byrd Check if this is: Christina First Name Middle Name Last Name An amended filing A supplement showing post-petition chapter 13 First Name Last Name Middle Name income as of the following date:

MM / DD / YYYY

A separate filing for Debtor 2 because Debtor 2

maintains a separate household.

| Official | Form | 1061 |
|----------|---------|------|
| Ulliciai | 1 01111 | 1000 |

Debtor 1

Debtor 2

(Spouse, if filing)

Case Number (If known)

Schedule J: Your Expenses

United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS</u>

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | Describe Your Household | | | | | | |
|---|--|---|-----------------|-------------------------------|--|--|--|
| 1. Is this a joint case? | | | | | | | |
| ļļ | No. Go to line 2. | | | | | | |
| L | Yes. Does Debtor 2 live in a separate household? | | | | | | |
| | No. | | | | | | |
| | Yes. Debtor 2 must file a separate Schedule J. | | | | | | |
| 2. | Do you have dependents? | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? | | | |
| | Do not list Debtor 1 and Yes. Fill out this information for | 2000011012000012 | | No | | | |
| | Debtor 2. each dependent | Son | 11 | | | | |
| | Do not state the dependents' | | | Yes | | | |
| | names. | | | X No | | | |
| | | | | Yes | | | |
| | | | | X No | | | |
| | | | | Yes | | | |
| | | | | x No | | | |
| | | | | Yes | | | |
| | | | | | | | |
| | | | _ | | | | |
| | | | | Yes | | | |
| 3. | Do your expenses include expenses of people other than | | | | | | |
| | yourself and your dependents? | | | | | | |
| Part 2: Estimate Your Ongoing Monthly Expenses | | | | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report | | | | | | | |
| expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in | | | | | | | |
| the applicable date. | | | | | | | |
| Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses | | | | | | | |
| | | | | | | | |
| 4. | The rental or home ownership expenses for your residence. Include first mortgage | e payments and | | #075.00 | | | |
| | any rent for the ground or lot. | | 4. | \$875.00 | | | |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | 4a. | \$0.00 | | | |
| 4b. Property, homeowner's, or renter's insurance | | 4b. | \$0.00 | | | | |
| 4c. Home maintenance, repair, and upkeep expenses | | | 4c. | \$50.00 | | | |
| | 4d. Homeowner's association or condominium dues | | 4d. | \$0.00 | | | |
| Officia | Official Form 106J Record # 758932 Schedule J: Your Expenses Page 1 of 3 | | | | | | |

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Christina

Middle Name

Debtor 1

First Name

Last Name

Case Number (if known) _

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$100.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$270.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$600.00 7. 7. Food and housekeeping supplies \$50.00 8. 8. Childcare and children's education costs \$130.00 9. Clothing, laundry, and dry cleaning 10. \$40.00 Personal care products and services 10. \$140.00 11. Medical and dental expenses 11. \$220.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$10.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$135.00 15b. Health insurance 15b. \$98.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Federal or State Tax Deductions or Repayments \$131.25 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 758932 Case 18-05073 Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Document Page 38 of 65

Christina Debtor 1 Case Number (if known) _ First Name Middle Name Last Name \$105.00 Postage/Bank Fees (\$5.00), Business Expenses (\$100.00), 21. 21. Other. Specify: \$2,954.25 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$3,532.07 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,954.25 23b. Copy your monthly expenses from line 22 above. 23b.-\$577.82 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

 Official Form 106J
 Record #
 758932
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in | formation to ident | ify your case: | |
|---------------------------|--------------------|-----------------------------------|------------------------------|
| Debtor 1 | Christina | | Byrd |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| | | the : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u> (State) |
| Case Number (If known) | <u> </u> | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT | an attorney to help you fill out bankruptcy forms? |
| No | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| Under penalty of perjury I declare that I have read | the summary and schedules filed with this declaration and that they are true and |
| correct. | |
| ★ /s/ Christina Byrd | x |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 02/02/2018 | Date |
| MM / DD / YYYY | MM / DD / YYYY |

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| Fill in this in | formation to ide | | | 2020 |
|---------------------------|--------------------|--|-----------------|------|
| Debtor 1 | Christina | | Byrd | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | _ |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court f | or the : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> | |
| Case Number (If known) | | | (State) | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number | (if known). Answer every question. | | | |
|----------------|---|------------------------------|--|-------------------------------|
| Part 1 | Give Details About Your Marital Status and W | here You Lived Before | | |
| 01. Wh | at is your current marital status? | | | |
| | Married | | | |
| _ | Not married | | | |
| _ | rect maniou | | | |
| 02 D ui | ring the last 3 years, have you lived anywhere ot | her than where you live no | w? | |
| | No. | | | |
| | Yes. List all of the places you lived in the last 3 ye | ars. Do not include where y | ou live now. | |
| | | | | |
| | Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| | | | Same as Debtor 1 | Same as Debtor 1 |
| | 332 Marquette St | FROM 02/2015 | | |
| | Park Forest IL 60466-1914 | To 04/2017 | | |
| | | | | |
| | | | | |
| 03 Wit | thin the last 8 years, did you ever live with a spo | use or legal equivalent in a | community property state or territory? | (Community |
| | perty states and territories include Arizona, Cali d Wisconsin.) | fornia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas, | Washington, |
| _ | No. | | | |
| _ | Yes. Make sure you fill out Schedule H: Your Cod | ebtors (Official Form 106H). | | |
| | | | | |
| | | | | |
| Part 2 | Explain the Sources of Your Income | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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Debtor 1 **Christi**na Byrd Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$ 762 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$ 5,250 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2017) Operating a business Operating a business Wages, commissions, Wages, commissions. \$ 0 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) SSD \$ 1,791/m From January 1 of current year until SSI for minor child \$ 499/m the date you filed for bankruptcy: Child support \$ 367/m SSD \$ 21.492 For last calendar year: SSI for minor child \$ 5.988 (January 1 to December 31, 2017) Child support \$ 4,404 SSD For last calendar year: \$21,492 SSI for minor child \$5,988 (January 1 to December 31, 2016) Child support \$ 4,404

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Case Number (if known) ___

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Byrd ca

| | First Name | Middle Name | Last Name | | | |
|----|---|---|---|--|---|---|
| F | art 3: List Ce | ertain Payments You Made Before Yo | u Filed for Bankruptcy | | | |
| 06 | Are either Debt | tor 1's or Debtor 2's debts primaril | y consumer debts? | | | |
| | "incurre | r Debtor 1 nor Debtor 2 has primar ed by an individual primarily for a pe the 90 days before you filed for bar | ersonal, family, or housel | nold purpose." | | as |
| | □ No | o. Go to line 7. | | | | |
| | tot | es. List below each creditor to whom tal amount you paid that creditor. Do ild support and alimony. Also, do no o adjustment on 4/01/19 and every 3 | o not include payments for ot include payments to ar | or domestic support ob attorney for this bank | ligations, such as ruptcy case. | |
| | _ | or 1 or Debtor 2 or both have primage the 90 days before you filed for ba | - | ny creditor a total of \$6 | 00 or more? | |
| | | p. Go to line 7. | 1 3/ 3 1 3 | | | |
| | cre | es. List below each creditor to whom editor. Do not include payments for mony. Also, do not include paymen | domestic support obligat | ions, such as child sup | - | |
| | | | Dates of payments | Total amount paid | Amount you still | owe Was this payment for |
| | | Capital ONE AUTO Finan 3901 Dallas Pkwy Plano TX 75093 | Monthly | \$ 450 | \$ 20,217 | Mortgage Car Credit card Loan repayment Suppliers or vendors Other |
| 07 | Insiders include corporations of agent, including | efore you filed for bankruptcy, did your relatives; any general partners which you are an officer, director, pone for a business you operate as upport and alimony. | s; relatives of any general erson in control, or owner | al partners; partnership or of 20% or more of the | s of which you are a gener eir voting securities; and ar | ny managing |
| | _ | payments to an insider. | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| 80 | an insider? | efore you filed for bankruptcy, did you | | r transfer any property | on account of a debt that I | benefited |
| | No. | novements to an incider | | | | |
| | ☐ Tes. List all | payments to an insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| : | art 4: Identify | y Legal actions, Repossessions, and | Foreclosures | | | |
| | | | | | | |

Christina

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Christina Byrd Debtor 1 Case Number (if known) First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case 10 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. Yes. **List Certain Gifts and Contributions** 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift. List Certain Losses Part 6: 15 Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No. Yes. Fill in the details for each gift. Part 7 **List Certain Payments or Transfers** Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. Payment/Value: \$4,000.00: \$0.00 55 E. Monroe Street #3400 paid prior to filing. balance to be paid Chicago, IL 60603 through the plan.

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Document Page 44 of 65 Christina Byrd Case Number (if known) _

| | First Name | Middle Name | Last Name | | | | |
|----|---|-----------------------|------------------------------|-------------------------------|--|-------------------------------------|------------|
| | Party Contact Info | | Description and value of a | iny property transferred | Date pay or transfe | | of payment |
| | Hananwill Credit Counseling 115 N. Cross St. | | Credit Counseling Services | | 2018 | \$25.00 | |
| | Robinson, IL 62454 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 17 | Within 1 year before you filed for promised to help you deal with yo Do not include any payment or tra | our creditors or to n | nake payments to your cree | | fer any property to an | yone who | |
| | No. Yes. Fill in the details. | | | | | | |
| 18 | Within 2 years before you filed fo transferred in the ordinary course include both outright transfers ar | e of your business o | or financial affairs? | | | | |
| | Do not include gifts and transfers No. | - | ady listed on this statemen | t. | | | |
| 40 | Yes. Fill in the details for each | | | | | | |
| 19 | Within 10 years before you filed f beneficiary? (These are often call | | | o a self-settled trust or s | imilar device of which | you are a | |
| | No. Yes. Fill in the details for each | gift. | | | | | |
| P | art 8: List Certain Financial Acco | ounts, Instruments, S | afe Deposit Boxes, and Stora | age Units | | | |
| 20 | Within 1 year before you filed for sold, moved, or transferred? Include checking, savings, mone houses, pension funds, cooperat | y market, or other fi | nancial accounts; certifica | tes of deposit; shares in | - | | |
| | No. | | | | | | |
| | Yes. Fill in the details. | Last 4 di | gits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance befoliosing or transfe | |
| 21 | Do you now have, or did you have cash, or other valuables? | e within 1 year befo | re you filed for bankruptcy | , any safe deposit box o | r other depository for | securities, | |
| | No. Yes. Fill in the details. | | | | | | |
| | | Who else | e had access to it? | Describe the conter | nts | Do you still have it? | |
| 22 | Have you stored property in a sto | orage unit or place o | other than your home within | n 1 year before you filed | for bankruptcy? | | |
| | No. Yes. Fill in the details. | | | | | | |
| | | | e has or had access to it? | Describe the conter | its | Do you still have it? | |
| P | art 9: Identify Property You Hold | l or Control for Some | one Else | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Debtor 1

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| eptor 1 | Cilistila | | Буіц | Case Numbe | er (If Known) | | |
|---------------------------|---|--------------------|---|--------------------------------|--|---|--|
| | First Name | Middle Name | Last Name | | | | |
| 23 D o | you hold or control any pro | perty that som | eone else owns? Include any prope | erty you borrowed from, are | storing for, or hol | d in trust | |
| foi | r someone. | | | | | | |
| | No. | | | | | | |
| Yes. Fill in the details. | | | | | | | |
| | | 1 | Where is the property? | Describe the property | | Value | |
| | | | | | | | |
| Part 1 | Give Details About Envi | ironmental Infor | nation | | | | |
| or the | purpose of Part 10, the follo | owing definition | is apply: | | | | |
| haz | ardous or toxic substances | , wastes, or ma | r local statute or regulation concer terial into the air, land, soil, surface ne cleanup of these substances, wa | water, groundwater, or other | • | | |
| | e means any location, facility r used to own, operate, or ut | | s defined under any environmental ng disposal sites. | law, whether you now own, | operate, or utilize | • | |
| | zardous material means any ostance, hazardous material, | - | nmental law defines as a hazardou: taminant, or similar term. | s waste, hazardous substand | ce, toxic | | |
| Report | all notices, releases, and pr | oceedings that | you know about, regardless of wh | en they occurred. | | | |
| 24 Ha | is any governmental unit no | tified you that y | ou may be liable or potentially liab | le under or in violation of an | environmental la | w? | |
| . 10 | | iou you tilat y | and the matric of potentially liab | or in violation of all | Jimentai la | | |
| | No. Yes. Fill in the details. | | | | | | |
| | res. Fill III the details. | | Governmental unit | Environmental law, if you | ı know it | Date of notice | |
| | | | | ,, , | | | |
| 5 Ha | ive you notified any governm | nental unit of a | ny release of hazardous material? | | | | |
| | No. | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | | • | Governmental unit | Environmental law, if you | know it | Date of notice | |
| .6 H a | ive you been a party in any j | udicial or admi | nistrative proceeding under any en | vironmental law? Include se | ttlements and ord | lers. | |
| | No. | | | | | | |
| _ | Yes. Fill in the details. | | | | | | |
| _ | _ | | Court or agency | Nature of the case | | Status of the case | |
| | | | | | | | |
| Part 1 | Give Details About Your | r Business or Co | nnections to Any Business | | | | |
| 7 W i | thin 4 years before you filed | for bankruptcy | y, did you own a business or have a | any of the following connect | ions to any busin | ess? | |
| | _ | | trade, profession, or other activity | | | | |
| | A member of a limited li | iability compan | y (LLC) or limited liability partnersl | hip (LLP) | | | |
| | A partner in a partnersh | nip | | | | | |
| | An officer, director, or r | managing exect | utive of a corporation | | | | |
| | An owner of at least 5% | of the voting of | or equity securities of a corporation | 1 | | | |
| | | | | | | | |
| _ | | ies. Go to Part | 12. | | | | |
| | No. None of the above appli | | and a facility for a facility of the facility | | | | |
| | | ove and fill in th | e details below for each business. | | | | |
| | | | e details below for each business. Describe the nature of the business | | Employer Identific | | |
| | Yes. Check all that apply ab | 00, | | | | ation number cial Security number or | |
| □ ■ | Yes. Check all that apply ab Shipt, 17 20th St. N, Suite 10 | 00, | Describe the nature of the business | | | | |
| | Yes. Check all that apply ab Shipt, 17 20th St. N, Suite 10 | 00, | Describe the nature of the business | | Do not include So | | |
| □ | Yes. Check all that apply ab Shipt, 17 20th St. N, Suite 10 | 00, | Describe the nature of the business | C | Do not include So | cial Security number or | |
| _ ■ | Yes. Check all that apply ab Shipt, 17 20th St. N, Suite 10 | 00, | Describe the nature of the business 1099 Driver | | Oo not include So EIN: <u>None</u> Dates business ex | cial Security number or | |
| | Yes. Check all that apply ab Shipt, 17 20th St. N, Suite 10 | 00, | Describe the nature of the business 1099 Driver lame of accountant or bookkeeper | | Do not include So | cial Security number or | |

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| Institutions, creditors, or other parties. No. | Debtor 1 | Christina | | Byrd | Case Number (if known) | |
|--|------------|----------------------------------|-----------------|-----------------------------------|--|--|
| Institutions, creditors, or other parties. No. | | First Name | Middle Name | Last Name | | |
| Date issued Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** ** ** ** ** ** ** ** ** | | | | you give a financial statement to | anyone about your business? Include all financial | |
| Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. *** **Is/* Christina Byrd** Signature of Debtor 1 Date 02/02/2018 | | No. | | | | |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Assuming the second of the second | | Yes. Fill in the deta | ils. | | | |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X | | | Date iss | ued | | |
| answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is Signature of Debtor 1 | Part 12 | Sign Below | | | | |
| Signature of Debtor 1 Date 02/02/2018 Date MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, | 18 U. | S.C. §§ 152, 1341, 1 | 1519, and 3571. | | nent for up to 20 years, or both. | |
| Date O2/02/2018 Date MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, | X | | | | Ochtor 2 | |
| MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, | | Signature of Debto | 1 1 | Signature or L | epitoi 2 | |
| MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, | | Date 02/02/2018 | | Date | | |
| ■ No □ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No □ Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, | | | | MM / | DD / YYYY | |
| | ☐ N | No 'es 'ou pay or agree to | | | | |
| | □ ' | es. Name of perso | on | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In r | e | | | | | | |
|------|---------------------------|---|---|-------------------------------------|---------------------|--------------------------|--|
| Chi | ristina Byr | d / Debtor | | | (| Case No: | |
| | | | | | (| Chapter: | Chapter 13 |
| | | DISCLO | OSURE OF COMP | PENSATION O | F ATTORNEY | FOR DEB | STOR |
| | npensation p | o 11 U.S.C. § 329(a) and Fed. paid to me within one year before rendered on behalf of the defendered. | Bankr. P. 2016(b), fore the filing of the | I certify that I a petition in bank | m the attorney for | or the aboved to be paid | e named debtor(s) and that to me, for services |
| | For legal | services, I have agreed to acce | ept | \$4,000.00 | | | |
| | Prior to th | ne filing of this statement I have | ve received | \$0.00 | | | |
| | Balance I | Due | · | \$4,000.00 | | | |
| | | | | | | | |
| 2. | The source | e of the compensation paid to | me was: | | | | |
| 4. | | | | | | | |
| 2 | | ouner: (sp | • / | | | | |
| 3. | i ne sourc | e of compensation to be paid t | o me is: | | | | |
| | De | btor(s) Other: (sp | ecify) | | | | |
| 4. | | e not agreed to share the above / law firm. | e-disclosed compen | sation with any | other person unle | ess they ar | e members and associates |
| | | e agreed to share the above-di y law firm. A copy of the agre ned. | | | | | |
| 5. | In return for case, inclu | or the above-disclosed fee, I h ding: | ave agreed to rende | r legal service fo | or all aspects of t | he bankrup | otcy |
| | | ysis of the debtor's financial s | ituation, and render | ing advice to the | e debtor in detern | nining who | ether to file a petition in |
| | | uptcy; tration and filing of any petitic | on sahadulas statan | nants of offgirs | and plan which m | nov ho rocu | uirad: |
| | - | esentation of the debtor at the | | | • | | |
| | c. Repre | eschiation of the debtor at the | meeting of electrons | and comminan | on nearing, and a | iny adjoun | icu nearings thereor, |
| 6. | By agreem | nent with the debtor(s), the abo | ove-disclosed fee do | es not include the | he following serv | vice: | |
| | | | | | | | |
| | | | CEI | RTIFICATION | | | |
| | | I certify that the foregoi payment to me for represent | - | - | - | - | or |
| | | Date: 02/02/2018 | /s/ | Mariusz Krzys | sztof Zatorski | | |
| | | Date | | gnature of Attor | | - | |

758932 Page 1 of 1 Record #

Geraci Law L.L.C. Name of law firm

Document Page 49 0/05RT UNITED STATES BANKRUPGE 10 ILLINOIS NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



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 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

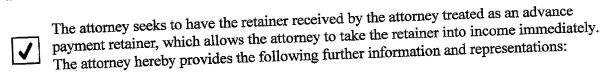


C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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 Any portion of the retainer that is not earned or required for expenses will be refunded to (d) the client; and
- The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of (e) services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

CONDUCT AND DISCHARGE E.

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



Document Page 53 of 65 ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES F.

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00

| 3. Before signing this agreement, the attorney has received ,\$ | |
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| 3. Before signing this agreement, are diverged toward the flat fee, leaving a balance due of \$ 4000; and \$ 310 for experience. | nses |
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| leaving a balance due for the filing fee of \$ | |

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Signed:

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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National Headquarters: 55 E. Monroe Street, #3400 Chicago, IL 60603

1-866-925-1313 www.infotapes.com

Date: 1/19/2018

Consultation Attorney: JMV

Record #: 758-932

| Attorney Retainer Agreement Chapter 13 |
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| X (Joint Debtor) |
| Dated: 1910 |
| x rev 1/1129 |
| A torney for the Debtor(s) Representing Geraci Law L.L.C. |

Case 18-05073 Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main CHAPTER 13:PLAN ACKNOWLEDGMENT

| O/ CONTROL LAN ACKNOWLEDGMENT |
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| Chapter 13 plan with my attorney, and the following are the terms being proposed: The total amount to be paid to the Trustee is estimated to be \$ 27.600 proposed: |
| The total amount to be paid to the Trustee is estimated to be \$ 27,600. I will pay \$ 575 per month for at to pay will increase if I am required to turn over some and the claims filed, and the total amount is |
| to pay will increase the samount may change depending any will pay \$575 per many |
| least 48 months. This amount may change depending on the claims filed, and the total amount I am required Any scheduled increases are as follows: |
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| 1.119 IUCINUES. |
| 1. These vehicles: 2015 Ford Escape |
| 2. These other secured debts: |
| 3. Tax debt of \$ Support debt of \$ Mortgage arrears of \$ |
| 4. Other: Mortgage arrears of \$ |
| Mortgages are provided to |
| Mortgages are provided for as follows: |
| Paid direct to the creditor every month Included in my plan payment |
| All of my debts are being paid in my Chapter 13 except the same and my plan payment |
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| / · // |
| My student loans PAYING IN DEFERMENT |
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| OTHER TERMS |
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| from my check, I must set it aside and send it to the Trustee. |
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| receive an inheritance, or otherwise become entitled to receive any sum of money during my bankruptcy. |
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| the Trustee unless my attorney specifically informs me in writing that I am not required to do so |
| the Trustee unless my attorney specifically informs me in writing that I am not required to do so. |
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| For Geraci Law: X 14/4 Date: 2/2/298 |
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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Christina Byrd / Debtor | Bankruptcy Docket #: |
|-------------------------|----------------------|
| | Judge: |

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 02/02/2018 /s/ Christina Byrd

Christina Byrd

X Date & Sign

Record # 758932 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Document In re Christina Byrd / Debtor

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B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 758932 Page 1 of 2 Record #

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Form B 201A, Notice to Consumer Debtor(s)

In re Christina

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 02/02/2018 | /s/ Christina Byrd | | |
|-------------------|--------------------------------------|--|--|
| | Christina Byrd | | |
| Dated: 02/02/2018 | /s/ Mariusz Krzysztof Zatorski | | |
| | Attorney: Mariusz Krzysztof Zatorski | | |

758932 Form B 201A. Notice to Consumer Debtor(s) Record # Page 2 of 2 Case 18-05073 Doc 1 Filed 02/23/18 Entered 02/23/18 17:34:43 Desc Main Document Page 59 of 65

| Debte | | Вуго | d Cas | e Number (if known) | |
|---|--|---|--|---|----------------------------|
| | First Name | Middle Name Last N | lame | - Number (ii known) | |
| Pa | Irt 6: Answer These Questi | ons for Reporting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts prima as "incurred by an individual of the line 16b. Yes. Go to line 17. | rily consumer debts? Consumer de dual primarily for a personal, family, or h | obts are defined in 11 U.S.C. § 101(8) ousehold purpose." | |
| | | 16b. Are your debts primal money for a business or in No. Go to line 16c. Yes. Go to line 17. | rily business debts? Business debts investment or through the operation of t | s are debts that you incurred to obtain he business or investment. | |
| | | 16c. State the type of debts yo | ou owe that are not consumer debts or b | ousiness debts. | |
| - | | | | | |
| | Are you filing under Chapter 7? | No. I am not filing under | Chapter 7. Go to line 18. | | 342 447042116411646 |
| | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are poid that find will be small that the same in the | | | exempt property is excluded and | |
| | any exempt property is excluded and | ∏No. | | | |
| | administrative expenses | — ∐Yes. | | | |
| | are paid that funds will be available for distribution | . ***. | | | |
| | to unsecured creditors? | | | | |
| | How many creditors do | 1 -49 | 1,000-5,000 | 25,001-50,000 | |
| | you estimate that you owe? | ☐ 50-99 ☐ 100-100 | ☐ 5,001-10,000 | 50,001-100,000 | |
| *************************************** | | ☐ 100-199 ☐ 200-999 | 10,001-25,000 | ☐ More than 100,000 | |
| | How much do you | \$0-\$50,000 | ☐ \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | |
| | estimate your assets to be worth? | \$50,001-\$100,000 | □ \$10,000,001-\$50 million | □\$1,000,000,001-\$10 billion | |
| • | , , , , , , , , , , , , , , , , , , , | ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | □ \$50,000,001-\$100 million | ☐\$10,000,000,001-\$50 billion | |
| 0. I - | How much do | | □ \$100,000,001-\$500 million | I ☐More than \$50 billion | · |
| | How much do you estimate your liabilities | □ \$0-\$50,000 ■ \$50,001-\$100,000 | \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | |
| | to be? | \$100,001-\$500,000 | □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million | □\$1,000,000,001-\$10 billion | |
| | | ☐ \$500,001-\$1 million | \$100,000,001-\$500 million | ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion | |
| Part 7 | 7: Sign Below | | | □ More than \$50 billion | |
| or yo | ou | I have examined this petition, and correct. | d I declare under penalty of perjury that | the information provided is true and | |
| | | If I have chosen to file under Cha of title 11, United States Code. I u under Chapter 7. | pter 7, I am aware that I may proceed, i understand the relief available under ea | if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed | |
| | | If no attorney represents me and this document, I have obtained an | I did not pay or agree to pay someone vand read the notice required by 11 U.S.C | who is not an attorney to help me fill out . § 342(b). | |
| | | | the chapter of title 11, United States Co | - • • | |
| | | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | |
| | | * Chultus Signature of Debtor 1 | ebyo x | Signature of Debtor 2 | |
| | | Executed on : 2 / 3 | 2/2018 / YYYY | Executed on | |
| | | 1404 / OD / | | MM / DD / YYYY | |

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| eck if this is |
|----------------|
| ended filing |
| ended fili |
| е |

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | | | |
|---|---|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No | | | | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with correct. | h this declaration and that they are true and | | | |
| Signature of Debtor 1 Signature of Debtor 2 | 2 | | | |
| Date | //// | | | |

12/15

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Christina Debtor 1 Byrd Case Number (if known) _ Last Name 28 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No. Yes. Fill in the details. Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? Yes. Name of person _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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DISCLAIMER DEBRors Have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wiifully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filling or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filling, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case

| Dated: 2 / 2 /2018 WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE [1]] | X Date & Sign | |
|--|----------------|--|
| | Christina Byrd | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re Christina Byrd / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

X Date & Sign

758932

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Form B 201A, Notice to Consumer Debtor(s)

In re Christina Byrd / Debtor

Page 2

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WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 1 / 2018

Christina Byre

X Date & Sign

Dated: 2/2/2018

Attorney: Mariusz Krzysztof Zatorski

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Christina Byrd

Date: 12018

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.